

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2001 8:00 am
Secretary of State

05-16-2001 90037 041 ****61.25

DOCUMENT # N00000006769

1. Entity Name

SOUTH FLORIDA YOUTH BASKETBALL ASSOCIATION, INC.

Principal Place of Business

Mailing Address

11098 BISCAYNE BLVD.
 SUITE 102
 MIAMI FL 33161

11098 BISCAYNE BLVD.
 SUITE 102
 MIAMI FL 33161

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0982715

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLIGAN, ROBERT
11098 BISCAYNE BLVD.
SUITE 102
MIAMI FL 33161

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	President Ernest Sosa
STREET ADDRESS	40 Birch Dr
CITY-ST-ZIP	Cooper City, FL 33026
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President Ronnie Smith
STREET ADDRESS	14301 SW 33rd Ct
CITY-ST-ZIP	Miramar, FL 33027
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Treasurer Richard Rodriguez
STREET ADDRESS	5200 SW 18th St.
CITY-ST-ZIP	Plantation, FL 35317
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ernest Sosa
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01
 Date

305-899-9924
 Daytime Phone #

CR2007 (10/00)